



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Won et al.

Examiner: Michael Manh Trinh

Serial No.: 10/723,517

Group Art Unit: 2822

Filed: November 26, 2003

Docket: 8028-36 (SPX200306-0004 US)

For: **HIGH DENSITY PLASMA CHEMICAL VAPOR DEPOSITION PROCESS**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

File only

AMENDMENT UNDER 37 C.F.R. §1.111

Sir:

In response to the Office Action dated March 17, 2005, please reconsider the above-identified application in light of the following claim amendments and remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

CERTIFICATE OF MAILING 37 C.F.R. §1.8(a)

I hereby certify that this correspondence (and any document referred to as being attached or enclosed) is being deposited with the United States Postal Service as first class mail, postage paid in an envelope addressed to: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450, on June 17, 2005.

Dated: June 17, 2005

Bernard Lau
Bernard Lau

06/27/2005 ASMITH 00000002 500679 10723517
01 FC:1202 50.00 DA

06/21/2005 NMNGUYEN 00000035 10723517

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50.00 IP

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

10/23517

CLAIMS AS FILED - PART I

		(Column 1)	(Column 2)
TOTAL CLAIMS			
FOR	NUMBER FILED	NUMBER EXTRA	
TOTAL CHARGEABLE CLAIMS	minus 20 =		
INDEPENDENT CLAIMS	minus 3 =		
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	26	Minus	24	2
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT B	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	**	=
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT C	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	**	=
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY		OTHER THAN SMALL ENTITY	
TYPE	OR	TYPE	OR
RATE	Fee	RATE	Fee
BASIC FEE	150.00	OR BASIC FEE	300.00
X\$ 25=		OR X\$50=	
X100=		OR X200=	
+180=		OR +360=	
TOTAL		OR TOTAL	

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 25=		OR X\$50=	100.00
X100=		OR X200=	
+180=		OR +360=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	100.00

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 25=		OR X\$50=	
X100=		OR X200=	
+180=		OR +360=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 25=		OR X\$50=	
X100=		OR X200=	
+180=		OR +360=	